



Keeping
Healthy

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When to Call the Doctor

You should call your child's doctor or nurse any time you are concerned or have questions. When you call the doctor, have the following information ready:

- Your child's temperature and how you took it
- The phone number of your drug store
- Your child's health insurance plan number

Call your doctor or nurse right away if your child has any one of these symptoms:

- Any fever, for babies under 3 months
- A fever of:
100.4°F, for babies 3-12 months old
103°F, for children 1 year or older
- Any fever that causes limpness
- A stiff neck or convulsions
- A lot of vomiting or diarrhea
- A very bad headache or pain
- A hard time staying awake
- Any burn
- Blood in the urine or bowel movements

Call your doctor within 24 hours if your child has any one of these symptoms:

- Any fever that lasts for more than 3 days
- Fever with repeated vomiting
- Rash
- Cough that lasts more than 2 days or makes it hard for your child to sleep
- Sore throat that lasts more than 2 days
- Refusing to eat

These are guidelines. Always call your doctor or nurse if you are worried, even at night or on weekends. If you think your child needs to be seen right away, call your doctor or nurse. They will tell you where to take your child. If you do not call first, you may be asked to pay for all services at a hospital emergency room.

If you do use the hospital emergency room:

- Be prepared to wait
- Bring your immunization record
- Bring your child's health insurance plan number
- Know if your child's health plan will cover this type of visit

For more information about medical emergencies, see page 143-145.

How to Take a Temperature

You can use a digital thermometer to take your child's temperature. A normal temperature is 98.6°F. The thermometer will “beep” when it is time to read it. There are three ways to take a child's temperature:

- Rectal (between the buttocks)—for infants
- In the armpit—for infants and children
- In the mouth—for children 5 years and older

The Rectal Temperature

The rectal temperature is the most accurate. First dip the narrow end of a digital thermometer in petroleum jelly. Then, lay your child on your lap, with his bottom facing upwards. Hold the thermometer between your thumb and other fingers. Gently insert the bulb end into the rectal opening an inch. Only push as far as it will slide in easily. Keep the thermometer in place until you hear the “beep.”

The Armpit Temperature

The armpit temperature is a little less accurate, but it can be easier to take. Remove your child's shirt, and insert the narrow end or bulb in the center of the armpit. Hold your child's arm and press it to his side. Keep the thermometer in place until you hear the “beep.”

The Oral Temperature

When your child is old enough, usually around age five, to keep the thermometer under his tongue without biting down, you can take a temperature by mouth. Place the narrow end under the tongue with the mouth closed. Keep it there until you hear the “beep.”

How to Give Medicine

When giving medicine, be sure to:

- Check with your doctor before giving any medicine.
- Use the right amount, or dose, at the right time. For the right dose, ask your doctor.
- Check the date on the bottle or package. Do not use medicines after the expiration date.
- Always give all the medicine the doctor says, even if your child seems better.
- Never call medicine “candy.”
- Be patient. Many children do not like medicine.
- Never leave medicine where your child can reach it. Keep caps tightly closed.
- Never give your child anyone else’s medicine.

By Mouth (Orally)

- Read the label carefully to find out how much and when to give the medicine.
- Measure the exact amount you need. Use a medicine spoon or medicine dropper, available at drugstores.
- If your child spits up the medicine, ask your doctor what to do.
- If your child has trouble taking pills, crush them into little pieces, and mix them with applesauce or ice cream.



Ear Drops

- Lay your child on his side, and gently pull his ear toward the back of his head.
- Give the exact number of drops prescribed.
- Try to keep child in the same position for one minute to allow drops to flow into ear.

Eye Drops or Ointment

- Lay your child on his back, put your finger below his eyes, and gently pull down the lower eyelid.
- Put the drops or ointment in the lower lid, or into the eye without touching the eye or eyelid with the dropper or tube.

Nose Drops

- Lay your child on his back.
- Put in the right number of drops.
- For nose sprays, your child can sit up or stand.

Suppositories

Suppositories are medicines that are put in your child's rectum.

Do not give your child a suppository without specific instructions from your doctor.

Healthy Teeth

All baby teeth and some permanent teeth are formed before birth. Starting at birth, it is important to care for your child's teeth.

Birth to Six Months

- After feedings, you may want to clean your baby's gums with a damp, soft, clean cloth.
- Sucking pacifiers and fingers is natural. Keep them clean. **DO NOT** put the pacifier in your mouth to clean it—this can spread germs that cause tooth decay. **NEVER** dip the pacifier in honey or sweet substances.
- The first teeth usually appear between 6 and 12 months. Signs of teething may include: drooling, chin or face rash, biting or gumming things, runny nose, crying, pain and irritability, fussiness at night or at feedings, and diarrhea. These signs could also mean that your baby is sick. Call your doctor or nurse if you are worried.
- For teething babies, give them something to chew on. Try a chilled teething ring, a clean, frozen cloth, or a teething cookie. **DO NOT USE** numbing gels or alcohol on your baby's gums.
- Check with the Department of Public Health, Office of Oral Health to see if your community's water has flouride by calling 617-624-6074. If your community's water has flouride, your baby does not need flouride supplements.
- Ask your doctor or nurse about fluoride supplements. Fluoride prevents cavities.
- **DO NOT** put juice or drinks with added sugar in your baby's bottle.
- **DO NOT** allow your baby to fall asleep with a bottle.

Six to Twelve Months

- Prevent “baby bottle tooth decay.” Do not give bottles filled with juice, formula, or drinks with added sugar at bedtime or naptime.
- Start brushing your baby’s teeth with a soft toothbrush after feedings. Use a “smear” of fluoride toothpaste. It is not good for your baby to swallow toothpaste.
- Avoid sweet and sticky snacks, such as dried fruit, raisins, or candy. Offer small pieces of fruit, vegetables, and cheese as snacks.
- If you do give sweets, give them at one time and not all day long.
- If your child has an injury or is bleeding from the mouth, call your doctor right away.

Beyond Twelve Months

- Schedule your child’s first exam with a dentist.

Between Ages Three and Five

- If your child has not had an exam at the dentist’s office by age three, she should have one now.
- She should get a cleaning every six months, unless your dentist recommends a different schedule.
- If your child is sucking her thumb or fingers at the age of five, gently begin encouraging her to give up the habit.

You can find a dentist by asking your child’s doctor or nurse, your local community health center, the Massachusetts Dental Society at 1-800-342-8747, or by calling the Department of Public Health, Office of Oral Health at 617-624-6074. Some health insurance plans pay for some dental care services. MassHealth pays for dental care services at dentist’s offices in the MassHealth Dental Program. Call 617-624-5621 for more information.

Healthy Ears

It is important to make sure your child's ears are healthy. Babies and children with hearing problems can have speech and language problems, too. Some babies are born with hearing problems. Some children may begin to have hearing problems as they grow older. Hearing problems can be temporary or permanent. They can happen because of ear infections, injuries, or disease.

The doctor or nurse will screen your child's hearing in the hospital when he is born and at well-child visits. Talk to your doctor or nurse if your child does not respond to sounds. Look for these signs:

- ☐ A family history of hearing problems
- ☐ Illness, injury, drugs, or medications during pregnancy
- ☐ Premature birth
- ☐ Physical problems at birth
- ☐ Meningitis
- ☐ Frequent rubbing or pulling of ears
- ☐ Ear infections, colds, or allergies at least once a month
- ☐ Your child is not learning like other children the same age

An ear infection can be very painful. Possible signs are: fever, headache, vomiting, crying, pulling at the ear, holding the head, or a bad smelling discharge from the ear. If you think your child might have an ear infection, call your doctor or nurse right away. If medicine is prescribed, be sure to use it all up or follow your doctor's directions.

Healthy Eyes

Your child should get a vision screening from a doctor or nurse at her check-ups. Screening is an easy and painless way to find vision problems. If a problem is found, your child will need a complete eye exam.

You must also watch for possible problems. Your child will not know if she has a vision problem. Be sure to tell your doctor or nurse if your child has any of these signs.

- ☐ Blinks or rubs eyes a lot
- ☐ Tilting the head
- ☐ Squinting
- ☐ Tripping, falling, or bumping into things
- ☐ Difficulty using small toys or tools
- ☐ Putting her head very close to playthings
- ☐ Crusty, red, or watery eyes

To help your child have good vision:

- Encourage active, outdoor play like jumping, running, hopping.
- Limit TV. When she does watch TV, have her sit at least eight feet away.
- Encourage the use of puzzles, crayons, scissors, lacing toys, blocks.
- Use good lighting to avoid eye strain.

Allergies

An allergy is a bad reaction to something—like a certain food or animal hair. Common allergic reactions are:

- Runny nose
- Watery, itchy eyes
- Itchy skin rash
- Breathing problems

Some people are allergic to one or more of these things:

- Dust
- Pollen from trees, weeds, and flowers
- Mold from plants, dead grass, and leaves
- Animal fur and feathers
- Insect venom, like bee stings
- Foods, such as eggs, nuts, chocolate, shellfish, milk, berries, or wheat
- Tobacco smoke
- Medicines or chemicals

If you think your child may have an allergy, talk to his doctor or nurse. The best way to treat a mild allergy is to keep your child away from whatever causes the allergic reaction. For other allergies, your child may need to take medicine. Some children may be advised to wear a medical alert bracelet. Some allergies can cause severe problems. For these allergies, your doctor may give you medicine to treat the reaction right away.

Asthma

Asthma is a disease of the lungs. People with asthma have very sensitive air passages in their lungs. During an asthma attack, the airways get smaller and become swollen with mucus. It becomes hard to get air out of the lungs. This causes breathing problems.

Some of the signs of asthma to watch for—*Each person may have different warning signs. If you notice any one of these, call your doctor.*

- Shortness of breath
- Fast breathing
- Pale or bluish skin color
- Problems sleeping
- Tiredness
- Wheezing—a whistling sound while breathing out
- Weak or soft crying in babies
- Coughing—worse at night, after exercise, in a smoky room, or in cold air
- Trouble breathing, talking, walking, or playing
- Pain or tightness in the chest

Triggers of Asthma

Triggers are things that cause an asthma flare-up. Different people may react to different triggers.

- Air pollution
- Cats, dogs, birds, mites, rodents, and roaches
- Cigarette smoke, smoke from a wood stove, or chemicals, such as perfume
- Cold air
- Colds and flu
- Exercise
- Pollen, house dust, mildew, mold, or grass

If your child has asthma, you and your doctor should be able to work out a plan to control it. This plan often includes both treatment and avoiding the things that cause it. Your doctor or nurse will tell you what to do. Your doctor may use the Massachusetts Asthma Action Plan to help manage your child's asthma. Copies of this form can be given to your child's school nurse and other care givers. You need to tell anyone else who takes care of your child what to do, too.

What You Can Do to Help Control Asthma at Home

- Keep your home clean and dust free
- Keep your child away from:
 - ➡ Pets
 - ➡ Rugs and carpets
 - ➡ Stuffed animals
- Cover your child's mattress with a plastic mattress cover
- Make sure you have enough asthma medicine. Remind your doctor when the prescription is running out or you have no more refills.
- Get a flu shot

Sun Safety

Getting too much sun can be dangerous, especially for children. Even children with dark skin need protection. Umbrellas and shade do not give enough protection. Protect your child in other ways, too.

- Do not use sunscreen on babies younger than 6 months old. When taking your young baby outside, be sure his skin is covered and he is wearing a hat.
- Apply sunscreen when your child will be out in the sun, even in the winter. Use sunscreen with a Sun Protection Factor (SPF) of 15-30. Apply it evenly to all exposed skin a half hour before going out.
- Dress your child in loose-fitting clothes that cover his arms and legs.
- During the hours of 10 AM–3 PM, keep children out of the sun as much as possible.
- Have him wear a wide-brimmed sun hat.
- Cover up on cloudy days, too—the sun can be just as strong even then.
- Put more sunscreen on after swimming.



Preventing Lead Poisoning

Lead poisoning is caused by swallowing or breathing in lead. It is very dangerous, especially to children under 6 years old. It can cause permanent damage to a child's brain, kidneys, and nervous system. Even small amounts of lead can cause serious learning and behavior problems. Your doctor will test your child for lead.

Your child's first test for lead poisoning is done between 9 and 12 months of age. After that, there is a test at every yearly check-up through age 4. A record of these screenings must be shown for your child to enter child care or kindergarten.

If your doctor thinks your child may be at high risk or if you live in a high-risk community, the screenings are done more often. You can find a list of high-risk communities by calling the Childhood Lead Poisoning Prevention Program at 1-800-532-9571 or by checking www.mass.gov/dph/clppp.

Avoid lead poisoning by finding the lead before your child does! Have your home tested for lead by a licensed inspector. If you rent, ask the owner for a copy of the lead inspection report. By law, the owner **must** tell you about any lead paint. If the home or apartment was built before 1978, call your local board of health and ask for someone to check for lead.

Children are most often poisoned by lead dust and lead paint in older homes. Lead dust can get on children's hands and toys, which they put in their mouths. Children often eat, chew, or suck on lead painted surfaces such as window sills and door frames. Lead can also be found in:

- Dust and soil
- Batteries
- Drinking water
- Some cosmetics and hair dyes
- Some imported, non-glossy, vinyl mini-blinds
- Painted toys, furniture, and playground equipment made before 1978
- Contaminated clothing from a parent's work or hobbies
- Some folk medicines
- Some antacid tablets
- Some art and craft supplies
- Some dishes and pottery

The Massachusetts Lead Law says that lead must be removed or covered in any home built before 1978, if a child under six lives there. Owners cannot evict or refuse anyone because of lead paint. Deleading—the removal of lead paint—must be done by a licensed deleader. In apartments, it is the owner’s job to hire and pay for an inspector and a deleader. Financial assistance is available for homeowners for deleading. For more information, call the Childhood Lead Poisoning Prevention Program at 1-800-532-9571.

- **Keep children away from peeling or chipping paint.** Cover loose paint with contact paper or paneling. Do not use sand paper—it fills the air with lead dust.
- **Wipe up paint chips and dusty areas with a wet mop or cloth and a cleaner called TSP.** You can get TSP at most hardware stores. You can also use dishwasher machine detergent that has phosphates in it. Do not vacuum paint chips—the lead gets back into the air.
- **Be careful when renovating.** Lead dust stirred up during renovations is one of the major causes of lead poisoning.
- **Run your tap water** for several minutes until you feel it get cold. Use only cold water for cooking or preparing drinks.
- **Wash your child’s hands and toys often.**
- **Feed your child a diet high in iron, calcium, and vitamin C—**they help stop lead from being absorbed in the body.

Iron

Lean meat

Beans

Green leafy vegetables

Cereals with added iron

Calcium

Milk and yogurt

Cheese

Spinach

Broccoli

Vitamin C

Fruit juices

Oranges

Tomatoes

Mangos

Carbon Monoxide

Carbon monoxide (CO) is a gas without color, taste, or smell. It is very dangerous. CO poisoning can kill. CO is made by burning fuel, such as gas, wood, kerosene, oil, or coal. Any fuel-burning appliance, such as a heater, generator, or wood stove, may cause poisoning if it is not working right. Children are poisoned more quickly than adults.

- NEVER use the gas stove or oven for heating a room.
- NEVER use fuel-burning appliances in a closed room.
- NEVER burn charcoal indoors or in a garage.
- NEVER leave a car running in a garage.
- NEVER try to fix an appliance that burns fuel.
- NEVER leave a child or pet in the car with the motor running.
- NEVER sleep in the car with the motor running.
- In the winter, ALWAYS check that home heating vents and car exhaust pipes are not blocked. If blocked, CO may go in your home or car.
- **Use a CO alarm to know if CO is in your home.**

The symptoms of carbon monoxide poisoning may feel like the flu.

The symptoms are:

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| • Headaches | • Weakness |
| • Dizziness | • Fatigue |
| • Nausea | • Vision problems |
| • Unclear thinking | • Loss of muscle control |
| • Shortness of breath | |

If you or your child has any of these symptoms and you think it might be CO poisoning, you and your child should leave your home. **If you do think it is CO, call 911.**

Notes Page